	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10688645					
CLAIMS AS FILED - PART i (Column 1) (Column 2)								SMALI TYPE	E!	NTITY	OR	OTHER		
T	OTAL CLAIMS		8					RAT	Ε	FEE	7	RATE	FEE	
F	DR	NUMBER FILED		NUMBER EXTRA		A	BASIC	FEE	385.00	OR	BASIC FEE	770.00		
TO	OTAL CHARGE	8 minus 20=		•			X\$ 9			OR	X\$18=			
INI	DEPENDENT C	minus 3 =		•	,		X43=			OR	You			
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT		·			+145=			1			
* [1	* If the difference in column 1 is less than zero, enter "0" in column 2								_		OR			
	CLAIMS AS AMENDED - PART II							TOTA	L		OR		770	
		(Column 1)	MENDEL	(Column 2) (Column 3				SMAL	LL E	ENTITY	OR	OTHER SMALL		
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER OUSLY	PRESEN- EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 6	Minus	# 2º		= /		X\$ 9=	=		OR	X\$18=	1	
ME	Independent	*	Minus	<b></b> 3		= /		X43=		-	OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	_		OR	+290=	/	
		•						TOT	AL			TOTAL	/	
		(Column 1) (Column 2) (Column 3)							EE <b>L</b>		JON ,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST BER OUSLY	PRESEN EXTRA	<del>т</del>	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON I	Total	*	Minus .	**		=		X\$ 9=			OR	X\$18=		
AME	Ind pendent	*	Minus	***		=	_	X43=	1		OR	X86=		
Ľ	FIRST PRESE	ILTIPLE DEF	PENDENT	CLAIM	<u>. L</u>		+145=	7		OR	+290=	:		
							j	TOTA	u l			TOTAL		
		(Column 1)		(Colum	nn 2)	(Column		ADDIT. FE	E L			ADDIT. FEE		
	•	CLAIMS		HIGHE	ST .		7 1		Т	ADDI-	ſ		ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESEN EXTRA		RATE		TONAL FEE		RATE	TIONAL FEE	
NON	Total	*	Minus	**		-	_].[	X\$ 9=			OR	X\$18=		
AME	Independent	•	Minus	***		-	_	X43=	1	·	OR	X86=		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						<b>-</b> ∐	.145	$\dagger$					
• #	the entry in colur	nn 1 is less than th	entry in colu	nn 2, write	"O" in col	umn 3.	l	+145=	_1_		OR [	+290= TOTAL	<del></del> -	
	f the "Highest Nur	nber Previously Pa mber Previously Pa ber Previously Paid	id For IN THI	S SPACE is	less than	n 3, enter 🏗	3." ົ	ADDIT. FE	εL			DDIT. FEE		

FORM PTO-875 (Rev. 10/03)

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Application or Docket Number